

PTO/SB/01 (05-03)

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#5  
123-04  
B.J.H

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted With Initial Filing       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)  
**OR**

Attorney Docket Number	401364
First Named Inventor	Mark A. Tschiegg
<b><i>COMPLETE IF KNOWN</i></b>	
Application Number	10/085,497
Filing Date	April 11, 2003
Art Unit	Not Assigned
Examiner Name	Not Assigned

**I hereby declare that:**

**Each inventor's residence, mailing address, and citizenship are as stated below next to their name.**

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## RISK MANAGEMENT INFORMATION INTERFACE SYSTEM AND ASSOCIATED METHODS

the specification of which *(Title of the Invention)*

is attached hereto

OR

was filed on (MM/DD/YYYY) April 11, 2003 as United States Application Number or PCT International

Application Number 10/085,497 and was amended on (MM/DD/YYYY) \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 6]

This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to:  Customer Number  
or Bar Code Label 30954 OR  Correspondence address below

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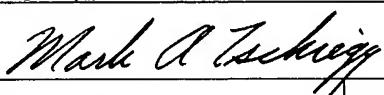
Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Mark A.	Family Name or Surname	TSCHIEGG
-------------------------------------------	---------	---------------------------	----------

Inventor's  
Signature



Date

Oct 29, 2003

Residence: City

State

Country

Citizenship

Granby

CT

United States

United States

Mailing Address

16 Hillyer Way

City	State	Zip	Country
Granby	CT	06035	United States

**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
-------------------------------------------	---------------------------

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City	State	Zip	Country
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Additional inventors or a legal representative are being named on the 4 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

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**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet**

Page 3 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Todd A.	REINART		
Inventor's Signature <i>Todd A. Reinart</i>	Date 11-22-03		
Residence: City Rancho Santa Margarita	State CA	Country United States	Citizenship United States
Mailing Address 24 Amantes			
Mailing Address			
City Rancho Santa Margarita	State CA	ZIP 92688	Country United States
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
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**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet**

Page 3 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Linda P.		BURROWS				
Inventor's Signature				Date 11/22/03		
Residence: City	Tolland	State	CT	Country	United States	
Mailing Address	36 Lee Lane					
Mailing Address						
City Tolland	State	CT	ZIP 06084-3948	Country	United States	
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Date
Residence: City	State	Country		Citizenship		
Mailing Address						
Mailing Address						
City	State	Zip	Country			
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Date
Residence: City	State	Country		Citizenship		
Mailing Address						
Mailing Address						
City	State	Zip	Country			

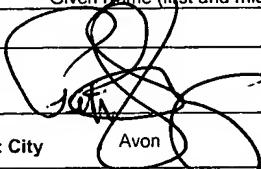
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Supplemental Sheet**

Page 3 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Peter F. 		LANGAN			
Inventor's Signature				Date <u>11/04/03</u>	
Residence: City	Avon	State	CT	Country	United States
Citizenship					United States
Mailing Address 12 Windrush Lane					
Mailing Address					
City Avon	State	CT	ZIP 06001-3146	Country	United States
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Inventor's Signature		Date			
Residence: City	State	Country		Citizenship	
Mailing Address					
Mailing Address					
City	State	Zip	Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Sumame			
Inventor's Signature		Date			
Residence: City	State	Country		Citizenship	
Mailing Address					
Mailing Address					
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Michael J.		SUTHERLAND			
Inventor's Signature	<i>Michael Sutherland</i>			Date 1-5-04	
Residence: City	Hartford	State	CT	Country	United States
Mailing Address	199 Beacon Street				
Mailing Address					
City	Hartford	State	CT	ZIP	06105
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Inventor's Signature				Date	
Residence: City		State		Country	Citizenship
Mailing Address					
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